

Bureau of Health Care Quality and Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVN5165AGC	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 04/13/2010
NAME OF PROVIDER OR SUPPLIER THE LODGE		STREET ADDRESS, CITY, STATE, ZIP CODE 2200 E LONG ST CARSON CITY, NV 89706		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 000	Initial Comments The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws. This Statement of Deficiencies was generated as a result of a complaint investigation conducted in your facility from 3/24/10 through 4/13/10. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division. The facility is licensed for 82 Residential Facility for Group beds for elderly and disabled persons, with 21 Residential Facility for Group beds which provide care to persons with Alzheimer's disease, Category II residents. The census at the time of the survey was 30. One resident file was reviewed. The following deficiencies were identified: Complaint #NV00024856 was substantiated. See Tag Y 515	Y 000		
Y 515 SS=G	449.259(1)(a) Supervision of Residents NAC 449.259 1. A residential facility shall: (a) Provide each resident with protective supervision as necessary.	Y 515		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 515	<p>Continued From page 1</p> <p>This Regulation is not met as evidenced by: Based on record review and interviews from 3/24/10 to 4/13/10, the facility failed to provide protective supervision for 1 of 30 residents (Resident #1).</p> <p>Findings include:</p> <p>Resident #1 was admitted to the facility on 9/16/09 from a secure unit at a local skilled nursing facility (SNF). The resident had been placed in the SNF from 8/28/09 to 9/16/09 after a hospitalization for delirium and dehydration. Resident #1's diagnoses while in the SNF included acute delirium, chronic dementia, senile dementia-Alzheimer type, recent dehydration and hypertension.</p> <p>During an on-site interview with the facility administrator, the administrator admitted she was unaware Resident #1 had been in a secure unit prior to moving into the facility. The administrator admitted she had not assessed the resident or reviewed the SNF record prior to admitting Resident #1 to the facility. The administrator reported the resident was brought to the facility by the resident's family friend and power of attorney (POA), to tour and inquire about moving in.</p> <p>Review of the facility's resident file revealed a service plan dated 1/23/10 which listed care level guideline as follows: Resident #1 requires escort to most daily meals, activities and outings and as judgement and memory are not always good; needs monitoring, guidance and occasional redirection.</p> <p>An interview with Resident #1 was attempted. The resident was oriented to person only and did not recall going to the physician's office or leaving</p>	Y 515			

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Y 515	<p>Continued From page 2</p> <p>the office. In addition, the resident was unable to answer some questions appropriately and was confused during portions of the interview.</p> <p>During a telephone interview with the long time friend and former neighbor of Resident #1, the friend reported she was contacted by the facility administrator in November 2009. The administrator reportedly told her that law enforcement picked the resident up about two blocks from the facility and returned her to the facility. The friend reported she was in the process of becoming Resident #1's guardian because of the resident's memory issues.</p> <p>During a telephone interview with Resident #1's estate trustee and her legal POA, the POA stated she had been notified by the facility of the November 2009 incident. The POA stated she thought the cold weather would keep the resident inside. The POA stated, "None of us knew she was this bad until this happened."</p> <p>During a review of documentation from the resident's chart at the physician's office and interview, it was revealed that on 3/22/10 Resident #1 had an appointment to have a lesion removed from her wrist. Office staff observed that the resident was dropped off unsupervised without an escort. The physician's staff called the facility at 9:15 AM to return to pick her up. The facility's Health Service Coordinator told them the driver would return. At 9:45 AM, the physician's office staff called the facility again and was told the same information. At 10:00 AM, Resident #1 said that she was not waiting any longer and walked out of the physician's office saying she was going to walk home. The local law enforcement was called to pick her up as physician's office staff followed the resident</p>	Y 515			

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Y 515	<p>Continued From page 3</p> <p>heading toward a heavily used traffic area. The officer detained her at 10:45 AM and the facility driver picked up the resident at a business 3/4 miles away from the physician's office at 11:00 AM.</p> <p>During an interview with the physician's office staff, the staff reported they had several past experiences with Resident #1 leaving abruptly from the office. On one occasion Resident #1 left the office before a procedure was completed. The resident had to be coaxed back to the office from one block away by her boyfriend. The staff reported that when the boyfriend returned Resident #1 to the office, the resident did not recall even leaving the office.</p> <p>During an interview with the facility Health Services Coordinator (HSC), she denied receiving all but the last phone call from the physician's office on 3/22/10 regarding the resident. The HSC reported the "guardian" was supposed to attend the 3/22/10 appointment with the resident. The HSC stated there was no documentation in the record of a conversation confirming that understanding by the "guardian" (the family friend). The family friend reported she had no knowledge of the 3/22/10 appointment until after the administrator notified her of the incident.</p> <p>After the incident, Resident #1 was transferred into the facility's secured unit on 4/8/10.</p> <p>A resident requiring protective supervision was dropped off at a medical office and left alone unsupervised. As a result, she wandered from the office, was located by the sheriff and held until facility staff came to pick her up.</p>	Y 515			

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Y 515	Continued From page 4 Severity: 3 Scope: 1	Y 515			

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